RECEIVED

		Amendment	,
Disclosure Report Cover			No No
Use this form for general report and committee information,	must be signed and submitted along wi	th other det	ailed forms.

Do not use this form to update information. Il-Committee Information . ID Number a. Full Name ERRY DAEKE FUZ b. Mailing Address (include City, State and Zip Code). d. Date Filed 270 THE DAEKE WAY ABERDEEN, NC 28315 . Phone Number 910-281-4059 2):Report Mear St. Period Stand Date (min/id/yy): 45 Period End/Date (min/id/yy): 57 Treasurer Full Name ibliali 2014 JERRY DEAN DAEKE 9:Asypero exerior estate of the constraint of the constraint on the constraint of th 6: Lype of Committee (Check One) Candidate Campaign Municipal State/County Referendum Party Organizational Organizational PAC Referendum Organizational Pre-referendum Independent Expenditure Joint Fundraiser Thirty-five day Quarterly ☐ Final Pre-primary First Legal Expense Fund Supplemental Final Pre-election Second 7. Type of Eunder (Copplicable) diedeoners Third Annual Pre-runoff Fourth Special Booster Fund Semi-annual Building Fund Mid Year Semi-annual Year End Mid Year 10. Special Report Name -Year End Other: Final 8: Number of Rundraisers this Report 3: ___Special Final Special HwAccount Information 11k-Account Information a. Financial Institution Full Name a, Financial Institution Full Name BB 🗗 b. Purpose c. Account Code b. Purpose . Account Code OPERATING EXPENSE l. Period Begin Balance d. Period Begin Balance I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections. D. DAEKE Printed Name of Signer Signature of Appointed Treasurer FOR OFFICE USE ONLY Delivery Method Employee: Date Received: Normal Mail Registered Mail Date Postmarked: Employee: Hand Delivered Electronically Filed Date Scanned: Employee: Signer has not received Date Data Entered: Employee: mandatory training Please Note: This form cannot be used to amend committee information such as the committee address, treasurer,

assistant treasurer, custodian of books information, or account information.

MOORE COUNTY PUBLIC COPY

Detailed Summary
Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment

Yes No

Start of Election Cycle: January 1, 2011 Reporting Period Ele 4) Cash on Hand at Start \$ 244.14 \$ RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) \$ \$	Total this ection Cycle
Start of Election Cycle: January 1, 2011 Total this Reporting Period Election Cycle: January 1, 2011 Reporting Period Election Cycle: January 1, 2011 \$ \$ 244.14 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	ection Cycle
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5) Aggregated Contributions from Individuals (CRO-1205) \$ \$	277.99
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6) Contributions from Individuals (CRO-1210) \$ 1,022 62 \$	277.99
7) Contributions from Political Party Committees (CRO-1220) \$	
8) Contributions from Other Political Committees (CRO-1230) \$	
9) Loan Proceeds (CRO-1410) \$ \$	
10) Refunds/Reimbursements to the Committee (CRO-1240) \$	
11) Other Receipt Sources	
11a) Interest on Bank Accounts (CRO-1250) \$	
11b) Contributions from Not-For-Profit Organizations (CRO-1250) \$ \$	` .
11c) Outside Sources of Income (CRO-1250) \$ \$	
11d) Legal Expense Fund - Other Sources (CRO-1270) \$ \$	
11e) Exempt Purchase Price Sales (CRO-1265) \$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) \$ 1,022.62 \$ 2.	255.61
<u>CAPPINDENUROS</u>	
13) Disbursements	
13a) Operating Expenditures (CRO-1310) \$ /2037. 05 \$	
13b) Contributions to Candidates/Political Committees (CRO-1310) \$	
13c) Coordinated Party Expenditures (CRO-1310) \$	
14) Aggregated Non-Media Expenditures (CRO-1315) \$	
15) Loan Repayments (CRO-1420) \$ \$	
16) Refunds/Reimbursements from the Committee (CRO-1320) \$	
17) In-Kind Contributions (CRO-1510) \$ 45,00 \$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) \$ /,082.05\$	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) \$ 184.71 \$	
<u>ADDITIONAL INFORMATION</u>	
20) Non-Monetary Gifts Given to Other Committees (CRO-1330) \$	
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) \$	
22) Debts and Obligations owed by the Committee (CRO-1610) \$	
23) Debts and Obligations owed to the Committee (CRO-1620) \$	
24) Account Transfers Within the Committee (CRO-1720) \$	
25) Administrative Support (CRO-1710) \$ \$	
26) Forgiven Loans (CRO-1440) \$ \$	
27) 48-Hour Notice Reports Sum (CRO-2220) \$ \$	
28) Contributions to be Refunded (CRO-1215) \$ \$ CRO-1100 NC State Board of Elections	August 2008

☐ Yes **Contributions from Individuals** Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 1. Committee Rull Name (and Rund if applicable) 2. ID Number Jerry Dacke for County Commissioner 3. Contributor Information d. Comments b. Job Title/Profession . Full Name, Mailing Address & Phone (include city, state, & zip) Casherene Shehem c. Employer's Name/Specific Field Council Carthage, DC 28327-1262 e. Election Sum to Date Member- Carthag f. Prior g. Account Code h. Form of Payment i. In-Kind Description 7.7-14 \$ 227.62 check 1 3. (Contributor Information) d. Comments b. Job Title/Profession , Full Name, Mailing Address & Phone (include city, state, & zip) Moore Co. Republicans Priesis) Olubo P.O. Box 1812 c. Employer's Name/Specific Field e. Election Sum to Date Southier Peren, P.C 22323 f. Prior g. Account Code | h. Form of Payment | i. In-Kind Description Date (mm/dd/yyyy) k. Amount \$ 50000 cheek \$ 3. Contributor Information Add Remove b. Job Title/Profession d. Comments . Full Name, Mailing Address & Phone County Convm. (include city, state, & zip) Muchales Joseph Pierkner 233 Laulo Read D. D. Bof 36 List End, AC 27376-0036 c. Employer's Name/Specific Field e. Election Sum to Date f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Description j. Date (mm/dd/yyyy) 15000 8-26-14 check \$ \$ 4.Fotal only this Page 877.62 \$ 5. Totallof AUU CRO-1210 Pages \$

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